L09000037247

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies : Certificates of Status
Special Instructions to Filing Officer:
A. LUNT
AUG 10 2009
EXAMINER

Office Use Only



100158877621

07/28/09--01013--015 **30.00



July 29, 2009

TODD A JOLLY 9414 ALMA STREET JACKSONVILLE, FL 32220

SUBJECT: ALMSGIVING ELECTRIC, LLC

Ref. Number: L09000037247

We have received your document for ALMSGIVING ELECTRIC, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Letter Number: 309A00025990

Agnes Lunt Regulatory Specialist II

Division of Cornerations DO BOY 6227 Tallahassos Florida 2221

COVER LETTER

TO: Registration S Division of Co						
SUBJECT:	ALMSGIVIN	G ELECTRIC, LLC				
SOBJECT.		ted Liability Company				
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
		Todd A Jolly		_		
		Name of Person				
	AI	msgiving Electric, LLC	•.	_		
		Firm/Company		₽.	26	
	9414 Alma Street			ECR LLA	09 AL	
Address			ETAR HASS	<u>.</u>		
	lac	ksonville, Florida 32220		RY O	-7	
	City/State and Zip Code				=	} ·
jo		ollytodd@bellsouth.net (to be used for future annual report notification)		FLORID	2009 AUG -7 AM 11: 00	-
For further information	concerning this matter, please of		neation)	>>	_	
	Todd Jolly	at (904)	312-2796			
Name	of Person	Area Code & Daytin		er	-	
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	d) Certifie	iling Fee cate of St ed Copy onal copy	atus &	osed)
Regis	LING ADDRESS: tration Section ion of Corporations	STREET/COUR Registration Secti Division of Corpo				

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Almsgiving E	lectric, LLC			
(Name of the Limited Liability Compa (A Florida Limited L	<u>ny as it now appears on our</u> Jiability Company)	<u>r records.</u>)		
The Articles of Organization for this Limited Liability Company Florida document numberL0900037247	were filed on April	17, 2009	and assig	gned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	oility company here:	TALL	2009 AUG	
Almsgiving El		Ä		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the	designation "	1 -<	breviation
Enter new principal offices address, if applicable:	9414 Alma Street		OF SH	
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville, Florida	a 32220		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9414 Alma Street Jacksonville, Florida	a 32220		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ords, <u>enter th</u>	e name of	the new
Name of New Registered Agent:				
New Registered Office Address:	Enter Flor	rida street addr	ess	
	City	_, Florida	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Sandy E Jolly	9414 Alma Street	Add
		Jacksonville, FL 32220	✓ Remove
MGR	Glenn A Cope	7050 Juliet Lane Jacksonville, FL 32244	✓ Add Remove
			Add Remove
			Add ≥∞ Remove
			10 39 A
			Add Remove
		LORIDA	Add Remove
D If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessar	
	mig any other information, enter	change(s) nere. (Anach dadinonal sheets, if hecessa	<u></u>
	· · · · · · · · · · · · · · · · · · ·		
	August 2.	2009.	
Dated	Jagore a.	d A. Poll	
	Signature of a	nember or authorized representative of a member	
		Todd A Jolly Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00